

## **HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWAII

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)									
PART I LOBBYIST									
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EMPLOYING ORGANIZATION (Fill in only if you	are employed by a business entity	which has been retained to lobby)	TELEPHONE						
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PART II ORGANIZATION									
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NAME OF PERSON RESPONSIBLE FOR PREPARE	ARING ORGANIZATION'S EXPE	ENDITURES STATEMENT	TELEPHONE						
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PAR	T III DESCRIPTION	OF SU	BJECTS UPON WHI	CH YOU	EXPECT TO LOBBY		
[]	Agriculture	[]	Education	IX/	Human Services	[]	Science, Technology & Economic Development
[ ]	Communications & Public Utilities	[ ]	Government Operations & Finance	[ ]	Intergovernmental Relations	, []	Tourism & Recreation
ıЖ	Consumer Protection & Commerce	[ ]	Hawaiian Affairs	[ ]	Labor & Employment	[ ]	Transportation
[]	Culture, Arts, Historic Preservation	- '	Health	[ ]	Planning, Land & Water Use Management	[ ]	Other: (indicate below)
[]	Ecology, Energy Environmental Protection	[]	Housing	[]	Public Safety & Corrections		
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	I hereby certify that the	infort	nation fumished above	e is, to ti	he best of my knowledg	<del>je, corre</del> c	ct and complete.
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		$C_{l}$	(Signature of Lobbyist)		C	م مارات	(Date)
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PAR	T V AUTHORIZATIO	N TO	LOBBY				
NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED							
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NAME	OF ORGANIZATION (if app	olicable	)	<u> </u>	TOTO RESIGNATION OF	TELEPHO	ONE
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I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.							
			d)			0-	108/03
(Signature of Authorizing Officer or Person Represented)					ented)		(Date)